NEWSPAPER NAME:	DATE:	
AUTHORIZATION FOR POLITICAL ADVERTISING IN ABOVE NEWSPAPER		
I,	, hereby authorize the publication of	of advertisement(s)
on behalf of the candidacy of	, who is	seeking the office
of I	further certify that I am authorized to place	this advertisement
in accordance with the Campaign Reporting	g Act of the General Statutes of North Caro	lina.
The advertising is for publication on the fo	ollowing date (s):	
Amount paid for advertising in this certific	eation and/or authorization: \$	
Check Number	Account listed as:	
SIGNED:		
	r or individual authorizing expenditure)	
Title		
Address		
	State Zi	
If agency/public relation firm, please comp	plete the following:	
Name of Agency		
Address		
	State Zip	